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AUTHOR Lenz, Diane
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ABSTRACT

The Paraprofessional Program of the Institute for Human Development has proven to be an effective means of providing early intervention services in northern Arizona's sparsely populated, culturally diverse rural communities. The program model includes identification and comprehensive professional evaluation of young handicapped children and hiring and training of indigenous paraprofessionals to provide service to children and their families. The program coordinator provides on-site supervision and works with paraprofessionals on three phases of program development: (1) initiating a home-based service program; (2) developing local resources and establishing a preschool classroom staffed by paraprofessionals; and (3) cooperating with local public schools interested in incorporating preschool programs for handicapped children. As of March, 1985, the Paraprofessional Program had five service centers--three on the White Mountain Apache and Navajo Reservations--and was developing two sites on the Hualapai Reservation. The paraprofessional staff of eight served 40 children from eight months to five years whose handicaps ranged from moderate to severe. The annual program budget of $70,000 is considered cost-efficient. By employing local paraprofessionals--familiar with the culture and politics of their communities--the program is able to provide consistent services to a population not effectively served by much more costly, city-based programs. (JHZ)

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Working with Cross-Cultural & English-as-Second-Language Populations: Employment of Paraprofessionals

Paper presented at the Annual National Rural Special Education Conference (5th, Bellingham, WA, March 19-22, 1985).

By Diane Lenz
Flagstaff, Arizona
March 1985

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Working with Cross-Cultural & English-as-Second-Language Populations:

Employment of Paraprofessionals

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The Institute for Human Development (IHD) is a service, research and training agency affiliated with Northern Arizona University. The Institute provides evaluation and education services for handicapped children and adults who reside in the five county area of Northern Arizona.

The Institute is located in Flagstaff, Arizona, a community of about 40,000, which is situated at the base of the San Francisco Peaks at an elevation of 7000 feet above sea level. The Arizona Departments of Education, Health Services and Economic Security are primary funding sources for the Institute's service programs. The Paraprofessional Program is one of four childrens' services components housed at the Institute. Other childrens' programs include the Northern Arizona Child Evaluation Services program, an Infant Stimulation program and an Integrated Preschool classroom.

The Paraprofessional Program illustrates the Institute's service philosophy, which emphasizes identification of service needs and model program development, with program administration ultimately being turned over to other local agencies.

This paper will present information about the (IHD) Paraprofessional Program from two perspectives: (1) The rural, cultural and political contexts of the program; and (2) program history and model development.

Geography and Culture

The Paraprofessional Program has proven to be an effective educational alternative for providing early intervention services in Northern Arizona's sparsely populated, culturally different rural communitities.

The population of Northern Arizona's 60,929 mile, five county region is approximately six people per square mile. Northern Arizona is well known for its severe winters and the heavy rains characteristic of the summer monsoon season. This inclement, unpredictable weather makes travel hazardous over narrow roads (some of them unpaved) through high mountain passes and desert canyons.

Northern Arizona culture varies as much as its geography. The Paraprofessional Program currently includes five service sites. Three of them are on the White Mountain Apache and Navajo Reservations. Service site development is in progress in the Hualapai Reservation community of Peach Springs and the Havasupai Reservation village of Supai. Supai is located in the interior of the Grand Canyon, and is accessible only on horseback, on foot or by helicoptor.

Political Considerations

In May of 1984, the Arizona legislature passed permissive legislation allowing Arizona public schools to apply for funds to serve handicapped 3-5 year olds. The legislation established a funding formula, which set an average funding level of about $2500.00 per handicapped child.

Prior to this legislation, infant stimulation and early intervention services were provided by public or private agencies funded by state developmental disabilities money or federal preschool incentive money. The legislation meant a positive step toward assuring services for Arizona's handicapped preschoolers. Since the legislation encourages local education agencies to apply for funds to serve preschool age handicapped children in their districts, it is also consistent with the Institute°s service

philosophy of initiation and development of services with the intent of turning administrative responsibility over to local authorities-in this case the school districts.

The administration of preschool services by rural school district Special Education programs, does, however, present certain difficulties. These school districts tend to have difficulty recruiting and maintaining certified staff and locating adequate space for existing programs, much less new programs. Additionally, the Arizona funding formula discriminates against rural districts where small numbers of handicapped preschoolers cannot generate enough funds to provide for hiring certified teachers and professional therapy staff and cover the costs of classroom space and special equipment. The legislation does not provide funding for services for the birth to two-year-old population of handicapped infants and toddlers.

In summary, the rural, geographical, cultural and political variables contribute to the need for an alternative program model which emphasizes the efficient use of local service resources.

Model Development

Historically, the Paraprofessional Program model evolved out of initial efforts by the Institute's evaluation team to provide home-based evaluation follow-up services to children and families in rural Northern Arizona. This city-based, professional follow-up was very costly. Services were inconsistent due to lack of communication, and cultural and language barriers. The children did not make optimal progress under these conditions. The Paraprofessional Program model was developed by the Institute in an effort to more effectively fill the need for consistent

service delivery to handicapped children identified through the Institute's screening and evaluation process.

The Paraprofessional Program model involves the identification and comprehensive professional evaluation of a group of young handicapped children within a 50 mile radius of one community, and hiring and training indigeneous paraprofessionals to provide sevices to the children and their families. The paraprofessionals work part time, on a contract basis. Their pay ranges from $4.25 to $5.00 per hour. The number of hours worked by each paraprofessional depends upon the number of children identified for services in each area. Thus, personnel costs can be adjusted according to the needs of the community.

Hiring local people into the paraprofessional positions is important for several reasons. Paraprofessionals who live in these rural communities are familiar with the local culture and language. They are recognized and trusted. Unemployment is high in rural reservation communities. The program employs people who might otherwise be without work. This factor serves to reinforce the trust placed in the program and in the sponsering agency.

The paraprofessionals come to Flagstaff, soon after they are employed, to complete the week-long training program in the Teaching Research Data Based Classroom Model. The Institute is a training satellite for the Teaching Reasearch Infant and Child Center in Monmouth, Oregon. The Institute's Flagstaff-based Integrated Preschool Teacher and the Paraprofessional Program Coordinator are certified to train the model. Training for the paraprofessionals includes lectures on behavioral principles and use of the program°s placement test and curriculum to

establish teaching objectives for handicapped infants and preschoolers, and hands-on experience in the Integrated Preschool classroom. The training requires maximum effort from those Native American paraprofessionals who have English as a second language, since the training format and program concepts were originally intended to be used in training people with previous college level background in education. The Institute is involved with the Teaching Research Infant and Child Center, originators of the training program, in modification of the training strategies and content to make it more applicable to paraprofessionals and to speakers of English as a second language.

The Paraprofessional Program Coordinator travels an average of 1,000 miles, monthly, visiting each of five service sites once, to provide staff training, conduct parent meetings, and do program planning with paraprofessionals and other local service agencies. The Program Coordinator°s first task in the development of a new service site is to contact existing service agencies, such as Indian Health Service Units and Headstarts, to determine the potential need for a Paraprofessional Program in that community.

Once a group of children has been targeted for services, and paraprofessional staff have been hired and trained, the Program Coordinator and the paraprofessionals work together to determine the best way to utilize available resources to design and implement a program specific to the needs of each community. Program development then proceeds through a sequence of three steps: (1) Initiation of a home-based service program; (2) The development of local resources and the establishment of an integrated

preschool classroom staffed by paraprofessionals; (3) Encouragement and support of local public schools who show interest in incorporating the preschool programs.

Current Programs

The present paraprofessional staff includes eight paraprofessionals, five of whom are Native Americans. They provide services to forty children. Seventy-five percent of the children are Native Americans from the Navajo and White Mountain Apache tribes. The children range in age from eight months to five years, and in severity of handicap from moderate disabilities to severe multiple handicaps.

The levels of experience and education of the eight paraprofessionals are varied. Two are certified teachers, one in Special Education and one in Elementary Education. Two are High School graduates, and three have not completed High School graduation requirements Some have had previous experience with children in Headstart classrooms or the pediatric wards of Indian Health Service hospitals. Others have had little experience with children, outside of their own families, but have had work experience in tribal family assistance programs.

To date, two programs have completed the three-step program development sequence. Preschool programs continue in two communities, home-based programs continue in two communities, and the Institute has initiated the first steps of program development for two new service service sites.

Conclusion

In summary, the advantages of this Paraprofessional Program Model are as follows:

(1) The Paraprofessional Program insures consistent services to handicapped infants and preschoolers who might otherwise receive limited or no services.

(2) The paraprofessionals are familiar with the culture and the significant politics of their communities. This is very helpful as the Institute works with various community agencies to make decisions about service site development.

(3) The employment of local paraprofessionals reduces the rate of staff attrition.

(4) The program employs local people in communities where unemployment is high.

(5) The Institute's Paraprofessional Program Coordinator and the local paraprofessionals lend credibility to one another. The paraprofessional is comfortable with and trusted by the families. The Coordinator is recognized by them as a professional resource who has knowledge and experience with children like theirs.

(6) The program is cost-efficient. The annual cost of this program is approximately $70,000. A comparable program utilizing professional staff to serve forty children, on a less frequent basis, would be much more expensive.